CAMPAIGN TREASURER'S REPORT SUMMARY							
(1) John Gebree Beckford Name (2) 344 Hearthor Terrace Address (number and street) Landrock for John Gebree Beckford Address (number and street) Landrock for John Gebree Beckford City, State, Zip Code City, State, Zip Code Check here if address has changed (3) ID Number: (4) Check appropriate box(es): Candidate Office Sought: Political Committee (PC) Electioneering Communications Org. (ECO) Party Executive Committee (PTY) Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed							
(5) Report Identifiers							
	11 1 30 1 17 Report Type: M 11						
	ocial Election Report 2017						
(6) Contributions This Report	(7) Expenditures This Report						
Cash & Checks \$,,	Monetary Expenditures \$,,						
Loans \$,,	Transfers to Office Account \$,,						
Total Monetary \$,,	Total Monetary \$,,						
In-Kind	(8) Other Distributions \$,,						
(9) TOTAL Monetary Contributions To Date \$	(10) TOTAL Monetary Expenditures To Date \$,, 322.45						
(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)							
It is a first degree misdemeanor for any person to faisily a public record (ss. 635.13, F.S.) / I certify that I have examined this report and it is true, correct, and complete:							
(Type name) JOHN BECKFORD	(Type name) JOHN GEORGE BECKFORD						
☐ Individual (only for IE ☐ Treasurer ☐ Deputy Treasurer	Candidate Chairperson (only for PC and PTY)						
x Abelfl Signature	x Beelfle Signature						

(1) Name JOHN GORGE BECKFORD (2) I.D. Number									
(3) Cover Perio	od 1 0 1 7 through	,30,17	(4) Page of						
(5) Date (6) Sequence Number	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10)	(11)				
11/3917	TO BANK 1701 ROUTE 70 EAST CHORRY HILL NJ 08034	STATEMONT FEE	CAN		\$1.00				
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CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name JOHN GORGE BECKFORD (2) I.D. Number								
(3) Cover Period 11 / 01 / 17 through 11 / 30 / 17 (4) Page 1 of 1								
(5) Date	(7) Full Name	(8)	(9)	(10)	(11)	(12)		
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Contributor Type Occupation	Contribution Type	In-kind Description	Amendment	Amount		
1 1	NONE							
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DS-DE 13 (Rev. 11/13) SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES